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C-A OPERATIONS PROCEDURES MANUAL

13.3.2 Nonconformance and Corrective and Preventive Action

Text Pages 2 through 4

Attachments

Hand Processed Changes

HPC No.	<u>Date</u>	Page Nos.	<u>Initials</u>
	Approved: <u>Signature on File</u> Collider-Accelerator Department Chairman		Chairman Date
D. Passarello			

13.3.2 Nonconformance and Corrective and Preventive Action

1. Purpose

- 1.1 To define the Collider-Accelerator process for the identification and processing of nonconforming items, services, or processes. The requirements of this document supplement the BNL's Standards Based Management System (SBMS)

 Nonconformance and Corrective and Preventive Action Subject Area.
- 1.2 Within the SBMS there are numerous processes available for handling nonconformances. If it has been determined that the requirements of the Nonconformance and Corrective and Preventative Action Subject Area are applicable, then the additional requirements of this document shall be followed.
- 1.3 Definitions (for general definitions reference SBMS)
 - Nonconformance An activity, attribute, or document, which fails to comply with established requirements, and may lead to a condition having an adverse effect on quality, environment, ES&H, operations, or reliability.
 - Major nonconformace A lack of an element, procedure, or a non-fulfilled requirement, that puts the process/system at jeopardy, and could lead to significant impact on quality, environment, ES&H, operations, or reliability.
 - Minor nonconformance An observed lapse in a program, process, procedure, or requirement, usually single incidents that do not have a significant impact on the quality, environment, ES&H, operations, or reliability.

2. Responsibilities

- 2.1 This procedure shall be implemented by C-A staff who identify potential nonconformance, and to those who are assigned the responsibility of analyzing, determining corrective/ preventive actions, and dispositioning nonconformances.
- 2.2 All staff members shall report conditions or activities that may represent a potential or actual nonconformance. This notification shall be to the individual or organization responsible for the condition or activity. When appropriate, staff members shall take action to mitigate potential ESH or programmatic impacts of the nonconforming condition.

2.3 C-A QA shall assist C-A staff in the preparation of Nonconformance Reports (NCR). C-A QA shall maintain, distribute, track and trend, as appropriate, all C-A NCRs.

3. <u>Prerequisites</u>

None

4. Precautions

None

5. <u>Procedure</u>

- 5.1 A graded approach to analyzing, controlling, correcting, and documenting nonconformances, is used to ensure that corrective actions are commensurate with the actual or potential ESH/programmatic impact of the nonconforming condition, and to effectively prevent its recurrence.
 - Nonconformances determined to have an ESH&Q Risk Level of High (A1-Critical), Moderate (A2 Major), or are findings resulting from an Environmental Management System assessment, shall be documented on a BNL Nonconformance Report (NCR) form. Processing of the NCR shall be in accordance with the Nonconformance and Corrective and Preventative Action Subject Area and this document.
 - Nonconformances determined to have an ESH&Q Risk Level of Low (A3 -Minor), shall be documented, e.g. BNL <u>Inspection/Test Record</u> or Assessment Reports.
 - Nonconformances determined to have an ESH&Q Risk Level of Negligible (A4 Negligible), are dispositioned, as appropriate. Documentation is at the discretion of the responsible individual.

5.2 Processing

5.2.1 C-A QA Office shall process the documentation related to nonconformances determined to have an ESH&Q Risk Level of High (A1- Critical), Moderate (A2- Major), or are findings resulting from an Environmental Management System assessment. This includes database maintenance, tracking, and trending, as appropriate, and ensuring copies of NCR are forwarded to the BNL Quality Program Office. 5.2.2 Documentation related to A3-Minor and A4-Negligible nonconformances shall be maintained and dispositioned by the responsible individual. When appropriate, C-A QA shall be consulted.

The responsible individual shall evaluate reported nonconformances, review the documentation describing the nonconformance for completeness, impact on form, fit, function, schedules, costs, technical adequacy, interface, and appropriate disposition.

If deemed necessary, requirements for further action to prevent recurrence of the nonconformance shall be documented.

5.2.3 Individuals who must be informed of or carry out the corrective/preventative action shall be supplied a copy of the nonconformance documentation.

6. Documentation

Depending upon the actual or potential ESH/programmatic impact of the nonconformance, documentation, e.g. BNL Nonconformance Reports (NCR), or BNL Inspection/Test Record, which describes the nonconformance and actions taken, shall be maintained per the Records Management Subject Area. Derivatives of the BNL Nonconformance Reports (NCR), and BNL Inspection/Test Record must be approved by C-A QA prior to use.

7. <u>References</u>

- 7.1 SBMS, Nonconformance and Corrective and Preventive Action.
- 7.2 SBMS, Records Management.

8. Attachments

None